

Center for Contract Compliance
4399 Santa Anita Ave #100
El Monte, CA 91731



***Please reference ID number **16-708512** in response to this query. Include General Contractor/Sub-Contractor and License Numbers. Thank you.

Date: April 20, 2017

Number of pages: (2)

TO:

City Clerk
City of Garden Grove
11222 Acacia Pkwy
Garden Grove, CA 92840-5208

Phone: (714) 741-5192

Fax: (714) 741-5205

From:

DORIS JOHNSON
CENTER FOR CONTRACT COMPLIANCE
4399 SANTA ANITA AVE SUITE #100
EL MONTE, CA 91731
dorisj@socalccc.org

Phone: (626) 444-8355 Ext. 101

Fax: (626) 444-8173

COMMENTS:

This is a formal request for the name of the awarded **General Contractor and or Prime Contractors, Sub-Contractors List, Estimated Start & Completion Date, Advertisement Date and Award Date** for the following referenced project.

PROJECT: Water Wells Abandonment – Three Locations

* We are requesting the documents pursuant to the California Public Records Act, Government Code Section 6250, et. Seq. Public Contract Code Section 4104, et. Seq., requires that the general contractor list the name, license number & location of each subcontractor at the time of bid submission. Under the statute, if the general contractor does not list the subcontractors, then the general contractor is required to perform the work with their own employees.

Please fax the requested information directly to our office @ (626) 444-8173 or email to dorisj@socalccc.org

Should you have any questions, please do not hesitate to contact me @ (626) 444-8355 Ext. 101
I look forward to your prompt response. Thank you for your time and courtesy!

PROJECT DATA

I.D. Number: 16-708512

PROJECT: Water Wells Abandonment - Three Locations - IFB
No. 51205

LOCATION: City of Garden Grove

Advertisement Date: 11/9/2016

Award Date: 2/22/2017

Estimated Start Date: 3/3/2017

Estimated Completion Date: 3/16/2017

Awarded General Contractor and or Primes: (attach list)

Name: Abundant Water Wells

Address: 10600 Leona Ave.

City: Leona Valley

State: CA 93551

License Number: C57 #981850

Sub-Contractor (s): or attach list:

Name: None

Address: _____

City: _____

State: _____

License Number: _____

Sub-Contractor (s): or attach list:

Name: _____

Address: _____

City: _____

State: _____

License Number: _____